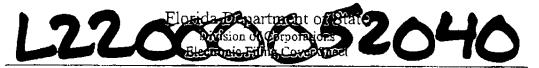
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Division of Corporations

Fax Number : (850)617-6383

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:				

LLC AMND/RESTATE/CORRECT OR M/MC RESIGN 528 PERSONAL AND BUSINESS SOLUTIONS LLC

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TO:	Registration Se Division of Cor			š .	* • • • • • • • • • • • • • • • • • • •
citair		ONAL AND BUSINESS SOLI	JTIONS LLC		
SUBJE	.CI:	Name of Lim	lted Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub	initted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		SANDRA VELEZ			
			Name of Person		
			Fitm/Company		
		2580 BROOKSTONE DR			
			Address		
		KISSIMMEE, FL 34744			
			City/State and Zip Co	ode	
		E-mail address: (to be used for future ann	ual report notification)
For fur	ther information o	oncoming this matter, please co	all:		
SAND	RA VELEZ		407 at ()	433-2089	
	Name o	ſ Person	at () Area Code	Daytime Telep	hone Number
Enclose	ed is a check for the	he following amount:			
□ \$2:	5.00 Filing Fee	■ \$30.00 Filing Pee & Certificate of Status	\$55,00 Filing F. Certified Copy (additional copy is	•	360.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S	Section	Regi	t Address: stration Section	
	Division of C	'ornorations	Divid	sion of Corporati	One

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

528 PERSONAL AND BUSINESS SOLUTIONS LLC					_	
(Name of the Limited Liability Compan (A Florida Limited Li	y <u>as it now upr</u> ability Compan	y)	ords.)			
The Articles of Organization for this Limited Liability Company v	vere filed on	01/31/2022		and	assig	n ed
Florida document number L22000052040						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabil	ity company	here:				
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," ti	ne designation "I	LC" or the a	bbreviation	a "L.L.(<u></u>
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)						
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
					2022	
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ddress on ou	r records, <u>en</u>	ter the nar	ne of the	B CT 20	registerer
Name of New Registered Agent:		<u>.</u>		· · · · · · · · · · · · · · · ·		
New Registered Office Address:	F	Florida street ad		_ 프 <u>네</u>	<u>2</u>	[
	Enter			:: -: :	17	
	City	,	Florida _	Zıp C	ode	
New Registered Agent's Signature, if changing Registered Agent:				•		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

H120000 1802 -

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MBR	RUBY VELEZ	2556 CROWN RIDGE CIR	BAdd
		KISSIMMEE, FL 34744	□ Remove
			□ Change
			CRemove
			□ Change
			□Add
			□Remove
			□Change
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). If amending an	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If the date	if other than the date of filing: (optional) is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) is inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the otive date on the Department of State's records.
f the record specifies ecord is filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	
	5V
	Signature of a member or authorized representative of a member
	SANDRA VELEZ
	Typed or printed name of signee